## FRANKLIN COUNTY NET PROFITS LICENSE FEE RETURN

ACCOUNTING	YEAR ENDED	QUESTIONS  1. Nature of Busines	S ( ALL QUESTIONS MUST BE .	ANSWERED FULLY)	
	PIDN	3. If organization wa	cial Security Number as discontinued, state when		
	TIDN	dissolution	or sale of	if by sale, give name and	
		address of success	sor		
		<ol><li>Did you have emp</li></ol>	ployees in Franklin County during y	ear? Yes No _	
Nama and Ada	dress of Business		anty License Fee been withheld from	-	
Name and Add	aress of Dusiness		emitted quarterly in accordance with	the regulations?	
			If answer is "No" explain		
			Corporation Sub-C		
			al OwnerFiduciary	Other (state) Accrual	
			arn is prepared - Cash uthorities changed the net income as		
		for any prior year	=		
			" attach a schedule of changes for ea		
PLEASE NOTIFY THIS O	OFFICE OF ANY CHANGES IN OWNERSHIP OR	9. Telephone Numb	e e	•	
NAME AND ADDRESS SE		10. Principal Busines			
		SCHEDULE A			
Total Gross income per	er Federal Return, Form(see attache	ed copy) \$	4. 77077 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	E ENGLOSE ONE COET	
2. Total Business Deductions per Federal Return\$				<u>r</u> ENCLOSE ONE COPY F FEDERAL	
3. Net Business income	per Federal Return	\$		N AS APPLICABLE	
4. ADD items not deduc	etible (Line F, Schedule B)	······\$	\$ WE WILL NOT BE ABLE TO PROCESS		
5. Total (Line 3 plus Lin	ne 4)	\$		ET PROFIT RETURN	
	ubject ( Line L, Schedule B)			COPY OF THE FEDERAL	
	NESS INCOME (Line 5 less Line 6)			ME TAX RETURN	
	4) is used enter here AVERAGE PERCENTAGE		% MAI	KE PAYABLE TO:	
•	ct to Franklin County License Fee (Line 7 x Lin			COUNTY TREASURER	
•	nse Fee @1% of amount Line 9	<u>\$</u>			
11. Less Estimated Payme		\$	EDA	MAIL TO:	
12. Balance (Line 10 min		\$		NKLIN COUNTY NAL TAX COLLECTOR	
Minimum Penalty \$25	month or portion of month, not to exceed 25%.  5.00 Date / /	<u> </u>	P.O. BOX 594		
14. Interest of 1% per mo		\$	FRANKFORT, KENTUCKY 40602		
•	n previous Over Payment.	\$	(:	502) 875-8709	
	lus Line 13 plus Line 14 minus Line 15)	\$			
		CHEDULE B			
	OR DEDUCT ONLY THOSE ITEMS WHICH AF				
	ased on income\$		UCT ITEMS NOT SUBJE		
	is ordinance\$		G. Interest on Corporate Bonds\$ H. Interest on U.S. Government Securites\$		
			Royalties on Patents, Copyrights\$		
· -					
	Other items (list)				
, ,			(Attach Schedule)	· ·	
	<u>-</u>	L. TOTAL DED	OUCTIONS (enter on Line6)	\$	
		SCHEDULE C			
	SINESS ALLOCATION PERCENTAGE - DIVID	E (COL. A) by (COL. B) to obt Column A	ain decimal. Carry out at leas Column B	st 6 places.  Column C	
	Allocation Factors	Franklin CTY. Factor	Total Factor	Percentage	
1.Total Gross Business R	- ·	\$	\$	0/0	
Employees	and Other Personal Service Compensation Paid		\$	%	
	CACE (Line 2 divided by sounds of seconds)		Enter on Line 8	9/0	
	AGE (Line 3 divided by number of percents)	na sahadulaa ara tro	and complete to the heart of	Emy knowledge	
i nereby certify th	hat the statements made herein and any supporti RETURN MUST	ng schedules are true, correct	, and complete to the best of	my knowledge.	
Signature of Individ	lual Preparing Return BE SIGNED	Signature of Taxp	payer	Date	